

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, HONOLULU, HAWAII 96813 or P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: (808) 587-0460 FAX: (808) 587-0470 email: ethics@hawaiiethics.org

email: ethics@hawaiiethics.org
Web site: www.hawaii.gov/ethics

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LOBBYIST REGISTRATION FORM TATE OF HAWAII

(Type of Print Clearly) STATE ETHICS COMMIS

·	(Type or	Print Clearly)	STATE ETHICS COMMISSION -
PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Toyofuku	Robert	S.	808-524-4155
MAILING ADDRESS (Street)	········		FAX 808-524-0573
1000 Bishop St., #503	-		EMAIL toyofuku@hiadvocates.com
(City)	(State)	 -	(Zip Code)
Honolulu	HI		96813
EMPLOYING ORGANIZATION (Fill in only	to lobby) TELEPHONE		
BT Consulting, Inc. dba Adv	same		
MAILING ADDRESS (Street)			FAX .
same	·		EMAIL
(City)	(State)	·	(Zip Code)

PART II ORGANIZATION YOU	TELEPHONE 203	
Coalition for Tobacco Fr	591- 6508 x 212 FAX 946-6197 EMAIL Jessica@tobaccotfreehawaii.org	
MAILING ADDRESS (Street)		
320 Ward Ave., Ste. 212		
(City)	(State)	(Zip Code)
Honolulu	HI	96814
NAME OF PERSON RESPONSIBLE	TELEPHONE	
Jessica Yamauchi		same
MAILING ADDRESS (Street)		FAX same
same		EMAIL Jessica@tobaccoafreehawaii.org
(City)	(State)	(Zip Code)

PART III DESCRIPTIO	N OF SUBJECTS UPON WH	ICH YOU EXPECT TO LOBE	BY				
☐ Agriculture	☐ Education	☐ Human Services	Science, Technology & Economic Development				
Communications & Public Utilities	Government Operation & Finance	 Intergovernmental Relations, International Affairs 	☐ Tourism & Recreation				
Consumer Protection & Commerce	☐ Hawaiian Affairs	☐ Labor & Employment	☐ Transportation				
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)				
Ecology, Energy Environmental Protection	☐ Housing ·	Public Safety & Corrections					
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	PART IV CERTIFICATION OF LOBBYIST						
Lhereby certify that ti	ne information furnished abov	e is, to the best of my knowle	dge, correct and complete.				
Sido Jouden 1-28-13							
(Signature of Lobbyist) (Date)							
		·					
PART V AUTHORIZATION TO LOBBY							
NAME	AME TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED						
Jessica Yamauchi	_						
NAME OF ORGANIZATION (if	applicable)		TELEPHONE 203				
Coalition for a Tobacco		808- 591- 6508 x 212					
MAILING ADDRESS (Street)			FAX same				
320 Ward Ave., Ste. 21	2		EMAIL Jessica@tobaccoffreehawaii.org				
(City)	(State)		(Zip Code)				
Honolulu	HI		96814				
! hereby authorize the	above - named person to er	ngage in lobbying activities or	behalf of the undersigned.				
Rum'ca Yamanchi 1/23/13							
	uthorizing Officer or Person Repres	cented)	(Date)				